PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

10054631

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
TC	TAL CLAIMS		26				ſ	RATE	FEE	1 1	RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	3 kminus 20=		*	16	Ī	X\$ 9=	144,0	OF	X\$18=	
IND	EPENDENT CL	AIMS	J mi	nus 3 =	* O		ı	X42=	1747	OR	X84=	· · · · ·
MÜ	LTIPLE DEPEN	DENT CLAIM PI	RESENT				ľ	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	L	TOTAL	514,6	ØЯ	TOTAL	
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1)	-	(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM! PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	X\$ 9=			X\$18=	
	Independent	*	Minus	***		=	ľ	X42=		OR	X84=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		ŀ					
+140=										OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								,				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	ľ	X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+280=	
										OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE I	<u> </u>	_	ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER		HIGH NUM PREVIO	IEST BER	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
		AMENDMENT		PAID		LXIIVA	ļ		FEE			FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		ŀ	4.10			.000	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
		her Previously Pa					r foui	nd in the apr	ropriate box	c in co	lumn 1	